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FILED
FEB 14 2008
RICHARD W. WILKINS
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §§ 1983

Name Kozlowski Matthew M
(Last) (First) (Initial)

Prisoner Number P82055

Institutional Address Hule Creek State Prison, P.O. Box # 409020
IONE, Ca. 95640-900

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

Kozlowski Matthew
(Enter the full name of plaintiff in this action.)

vs.

Charles D. Lee &
Robert Bowman

(Enter the full name of the defendant(s) in this action))

CV

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0954

Case No.
(To be provided by the clerk of court)

**COMPLAINT UNDER THE
CIVIL RIGHTS ACT,
42 U.S.C. §§ 1983**

E-filing

[All questions on this complaint form must be answered in order for your action to proceed..]

I. Exhaustion of Administrative Remedies

[Note: You must exhaust your administrative remedies before your claim can go forward. The court will dismiss any unexhausted claims.]

A. Place of present confinement Hule Creek State Prison

B. Is there a grievance procedure in this institution?

YES ☒ NO ()

C. Did you present the facts in your complaint for review through the grievance procedure?

YES ☒ NO ()

D. If your answer is YES, list the appeal number and the date and result of the

~~5454~~ 05-03383

COMPLAINT

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appeal at each level of review. If you did not pursue a certain level of appeal, explain why.

LOG number
1. Informal appeal 05-03383 Date 9/10/05
Denied at informal level

2. First
formal level LOG number 05-03383 Date 11/7/05
Partially Granted at First level

3. Second formal level LOG number 05-03383 Date 2/24/06
Partially Granted at second level

4 Third
formal level LOG number 05-03383 Date ~~6/8/06~~ 6/8/06
Denied at third level

E. Is the last level to which you appealed the highest level of appeal available to you?

YES ☒ NO ()

F. If you did not present your claim for review through the grievance procedure, explain why.

II. Parties

A. Write your name and your present address. Do the same for additional plaintiffs, if any.

Matthew Kozbowski P82055
Mule Creek State Prison
P.O. Box #409020

JONE, Ca-95640-9000

B. Write the full name of each defendant, his or her official position, and his or her

place of employment.

Charles D. Lee chief medical at Salinas Valley Prison.

Robert Bowman Doctor at Salinas Valley Prison

III.

Statement of Claim

State here as briefly as possible the facts of your case. Be sure to describe how each defendant is involved and to include dates, when possible. Do not give any legal arguments or cite any cases or statutes. If you have more than one claim, each claim should be set forth in a separate numbered paragraph.

Both Defendants Charles D. Lee & Robert Bowman are directly involved in this suite - They both saw me medically from 6/6/05 TO 11/1/05 & I have paper work as proof. Point is I was left in a cell for over 5 1/2 months with a huge hole in my calf 2 inch by 2 inches with 2 chips of bone coming out my leg. From the beginning of the defendants seeing me they both knew I had Osteomyelites in my calf & it had been recommended that I be given IV antibiotic treatment by other doctors who had seen me. ^{Both Defendants were in charge of my medical care.} Since I was not given treatment until 5 1/2 months after the diagnosis was made the infection soaked in so deep that I had to have surgery. & the doctor who did the surgery said he cut out as much bone as he ~~was~~ could with out amputating my leg & I still might have to have it amputated in the ~~later~~ future. I am filing under cruel & unusual punishment, & Deliberit indifference. Violation of 8th Amendment

IV. Relief

Your complaint cannot go forward unless you request specific relief. State briefly exactly what you want the court to do for you. Make no legal arguments; cite no cases or statutes.

I would like to be awarded ~~\$100,000.00~~ \$1,000,000, & would

COMPLAINT

1 like A letter of apouloge From defendents.
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7 I declare under penalty of perjury that the foregoing is true and correct.

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9 Signed this 7 day of February, 2008
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11 Koplonicki Matthew
12 (Plaintiff's signature)

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COMPLAINT